



Please send your completed form to ES Sports, 5 Southside Dr. Suite 139-11, Clifton Park, NY 12065. You may also email to: lmills@ESSportsCouncil.org

REGISTRATION INFORMATION

Last Name	First Name	Gender	
Team Name	Date of Birth	Age on Meet	
Address			
City	State	Zip Code	
Phone Number			
EMERGENCY CONTACT			
Contact's Name	Contact's Phone Number		
EVENT SELECTION 1 2 3 4 4	EVENT LIMITS Age 12 and under: 3 events Age 13-18: 4 events Age 19+: 4 events		
MEET SELECTION Patriot's Invitational (5/25/24) Constitution Classic (6/2/24) President's Open (6/9/24)	FEES (All meets except Adirondack Champs & Liberty Games) Youth: \$15 Adult: \$30 FEES (Adirondack Champs & Liberty Games) Youth: \$25		
 Adirondack Champs (6/14-15/24) Independence Invitational (7/6/24) Liberty Games T & F (7/12-13/24) TOTAL AMOUNT AUTHORIZED 	Adult: \$35 / 2 events; \$5 /each additional event Triathlon/Pentathlon: \$25 Heptathlon/Decathlon/Throws or Masters Pentathlon: \$35		
IVIAL APICUITI AUTIORIZED			

Card Provider (Visa/MC)

Expiration Date: _____

Credit Card Number:

Code: _____

□ I ACCEPT

By checking this box, I confirm that the Athlete and Parent/Guardian accept all rules and regulations as well as authorize this transaction by Liberty Group. I understand that if the total registration cost I have submitted in the field above labeled "registration amount" is incorrect, I will be billed the proper amount for my registration without further notification. I understand there will be no refunds for my non attending for any reason.

In consideration of your acceptance of my entry, I hereby for myself, my heirs, executors, administrators and assigns, waive all claims to damages which I might have against Empire State Sports Council, their Board of Directors and staff, event officials, volunteers, sponsors and site entities for any and all injuries suffered by me at said events.

Entrant: ____

Date:

If entrant under 18, Parent or Guardian Signature: